

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10/586,039		FILING DATE 7-13-06				
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52						
3	1		1				53						
4		1		1			54						
5		1		1			55						
6		3		3			56						
7		1		5			57						
8	1		1				58						
9	1		1				59						
10	1		1				60						
11	1		1				61						
12		3		3			62						
13		1		4			63						
14							64						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	6	↓	6	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	11	←	18	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	17		24				TOTAL CLAIMS						